

PO Drawer 400 • 2665 San Angelo • Ingleside, TX. 78362 Phone: 361-776-3815 - <u>building@inglesidetx.gov</u>

COMMERCIAL BUILDING PERMIT

Class of Work: New () Remodel/Repair ()

Building Site Address:					Permit #:		
Legal Description: Lot: Block: Subdivision:							
Setbacks:	Front:	_ Left side:	_ Right Side: _	Rear: _	Square Footage:	Va	luation: \$
OWNER:	Name:				Phone #:		
	Address:						
CONTRACTOR		(Num	ber & Street)		(City)	(State)	(Zip)
	Address:						
ENGINEER:		(Num	ber & Street)		(City)	(State)	(Zip)
	Address:						
ARCHITECT OR DESIGNER:	Name: _	(Num	ber & Street)		(City)	(State)	(Zip)
	radicss.	(Num	ber & Street)		(City)	(State)	(Zip)
Describe Work:							
Impact Fe Availability Site Plan of Driveway WPI-1 from Engineered Drainage Full size of Signed Ere Mechanich Elevation Survey, if or which constitution	es Form - ty of water (drawn to s is required m a Winds d Sealed a Form to be letailed but lergy Chec al Project S Certificate deemed ne	ent for you Water/Sewer (and sewer. Scale indicating d on plans if le storm Engineer and Signed Fou completed by ilding plans, in k Report to be Summary Report to show the for exessary (54-5 a portion of a p	Ar project to Must be paid possible gradings than One (1) r. Indation Plan. In Surveyor or Expectation Structure completed by the post of the with layour oundation floor No building personal projects of the project o	o be convicted to be converted to build out lines, but a cre of land are details. Energy Inspirit 12" above the critical details.	ding permit being issuiding lines, location and become become be issued for work of the street (which is the street (which is the street for work of the street	ing@inglesued) of building, where is higher	driveways, & parking) er). Is lot in Flood Plain? rty which has not been platted
properly dispos Porta Potty & c	ed of at th onstructio eside requ	e expense of t on material wa nires a copy of	he owner/cont aste trailer/dui f Engineer's fi	ractor. mpster is r nal report	equired on site dur	ing construc	aste must be removed and tion. The pre-treat report, and final
Signature:							
Zone:		Rev	riewed By:				Date: